

PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM



Centers for Disease
Control and Prevention
Office of Public Health
Preparedness and Response

TENNESSEE

\$11,288,993 FY 14 FUNDING

A critical source of funding for state, local, and territorial public health departments, PHEP supports the National Response Framework through the development of emergency-ready public health departments that are flexible and adaptable. The PHEP program annually provides vital resources to ensure local communities can respond effectively to infectious disease outbreaks, natural disasters, and chemical, biological, radiological, or nuclear events. Many resources states now use to respond to public health emergencies would not exist without PHEP support.

Since 2002, the PHEP program has provided funding to public health departments across the nation to develop and advance their capacity to effectively respond to a range of public health threats. Most recently, PHEP funding provided \$616 million to state, local, and territorial public health departments. A large

portion of PHEP funds supports staff on the ground who assist with preparedness and response activities. In the last decade, the PHEP program has supported over 4,000+ doctors, nurses, and emergency response specialists serving in more than 8,000 state and local public health emergency operations center activations.

CDC assists PHEP awardees by sharing technical expertise, best practices, and lessons learned, along with providing tools and resources needed to identify gaps and advance preparedness capabilities. By working side by side with PHEP awardees, CDC helps ensure that state, local, and territorial public health departments meet or exceed established standards for public health preparedness capabilities.

For more information about the PHEP Program, visit www.cdc.gov/phpr/map.htm.

CDC identified 15 public health preparedness capabilities critical to public health preparedness.

TENNESSEE TOP PHEP CAPABILITY INVESTMENTS

(excludes funding for sub-awardee contracts)

- ▶ **Public Health Surveillance & Epidemiologic Investigation**—30%
- ▶ **Emergency Operations Coordination**—21%
- ▶ **Volunteer Management**—17%
- ▶ **Public Health Laboratory Testing**—16%
- ▶ **Mass Care**—16%

For a complete list of all 15 public health preparedness capabilities, visit www.cdc.gov/phpr/capabilities/index.htm.

Through the PHEP program, states, territories, and localities are required to develop emergency plans covering children, pregnant women, and other vulnerable populations.

Older adults, and people with certain chronic conditions may require specialized medications, equipment, and other assistance.

In Tennessee,

- ▶ **36.5%** of households included children
- ▶ **3.8%** of respondents who know they are pregnant
- ▶ **19.8%** of respondents 65 or older
- ▶ **13%** of respondents who reported having diabetes
- ▶ **25.9%** of respondents who reported a condition that limits activities
- ▶ **11.5%** of respondents who reported a health problem that required the use of specialized equipment

Jurisdictional risk assessments (JRA) help to determine public health, medical, and mental/behavioral risks that may impact systems and services.

In Tennessee, the most recent JRA was completed between: 7/1/2012 – 6/30/2013

TENNESSEE

PHEP-funded field staff who support preparedness and response readiness.

Field Staff	2015–2016
Number of PHEP-funded field staff	3

Rapid sharing of information between partners about available resources, such as hospital beds, can save money and lives when every second matters.

Information Sharing	2015
Percentage of responses by partners to information requests within requested timeframe in an emergency or exercise	100%

In an emergency, it is critical that staff can meet quickly to plan for, lead, and manage a public health response.

Emergency Operations Coordination	2013	2014	2015
Number of minutes for public health staff with incident management lead roles to report for immediate duty	52	35	14

Timely and effective communication between lab and epidemiologic staff can reduce death and injuries in a public health emergency.

Public Health Laboratory Testing	2015
Result of communication drill between laboratory and epidemiological staff	Drill 1: Completed drill in time Drill 2: Completed drill in time

Laboratory Response Network biological (LRN-B) and PulseNet labs rapidly identify and notify CDC of potential biological health threats to minimize disease outbreaks.

Current number of LRN-B public health labs: 3

Public Health Laboratory Testing: LRN-B	2013	2014	2015
Proportion of LRN-B proficiency tests passed	1/2	7/7	1/2
Public Health Laboratory Testing: PulseNet	2013	2014	2015
Percentage of <i>E. coli</i> -positive tests analyzed and uploaded into PulseNet national database within 4 working days	99% (target: 90%)	98% (target: 90%)	99% (target: 90%)
Percentage of <i>Listeria</i> -positive tests analyzed and uploaded into PulseNet national database within 4 working days	89% (target: 90%)	100% (target: 90%)	100% (target: 90%)

LRN chemical (LRN-C) labs rapidly identify exposures to toxic chemicals, aid diagnosis, and minimize further human exposures.

Current number and level of LRN-C Labs: 1 (Level 2)

Public Health Laboratory Testing: LRN-C	2013	2014	2015
Proportion of core chemical agent detection methods demonstrated by Level 1 and/or Level 2 labs	3/9	4/9	3/9
Number of additional chemical agent detection methods demonstrated by Level 1 and/or Level 2 labs	0	0	0
Result of LRN exercise to collect, package, and ship samples	Passed	Passed	Passed